Chippewa-Cree Tribe "Celebrating Life" (Suicide Prevention) Registry Intake Form

Date of Report:			
Name (Last Name, First Name)			
Gender (circle one): Male Female Date of Birth:// Age:(please estimate if you do not know)			
Tribal Affiliation (Check one):Chippewa-CreeOther Tribe	9:	Unknown_	_
Marital status (check one):SingleMarriedCo-Habitating (unmarried and lividUnknown	Div	parated orced dowed	
Educational status (check one): Currently enrolled in school (space) Graduated high school Graduated from college Other:		Dropped out (Specify mo	е
Community of residence (checkAgencyBonneau AreaButtercupLaredoBox ElderAzure Site	Newtown	Parker Canyon Parker School Other Dry Fork	Unknown
Physical Address:			
Name of person who reported suicidal behavior?			
Contact information of person who made report ()			
Reporter's Relationship to Victim (check one):			
•	other	Father	
SisterBr	other	Other relative:	
SpouseBo	yfriend/Girlfriend	Friend	_
NeighborTe	acher/Educator	Other:	
Type of Self-harming Behavior (check one): Suicidal Ideation (i.e. suicide intent, but no physical harm)Suicide Completion Suicide Attempt (i.e. behavior motivated by intention to die)Unknown Self-injurious behavior (i.e. person hurts self, doesn't want to die) Other (i.e. suspicious injury that may be an attempt or completion)			
Method used (check all that apply):			
Hanging	Firearm		
Drug Overdose	Jump		
Laceration/cut	Other:		
No plan/method	Unknown		
Date of ideation/act: / /Time of ideation/act:: am/pm UNK			

State Tribal Relations Committee October 21-22, 2015